

## DECLARATION FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

One-Hand Operational Control Device of Foldable Stroller

the specification of which is attached hereto unless the following box is checked:

☐ was filed on \_\_\_\_\_ as United States Application Number or PCT International Application Number \_\_\_\_\_ and was amended on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 USC 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

Priority  
Claimed

Certified Copy  
Attached

|                   |                    |                                 |  |  |
|-------------------|--------------------|---------------------------------|--|--|
| _____<br>(Number) | _____<br>(Country) | _____<br>(Day/Month/Year Filed) | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| _____<br>(Number) | _____<br>(Country) | _____<br>(Day/Month/Year Filed) | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| _____<br>(Number) | _____<br>(Country) | _____<br>(Day/Month/Year Filed) | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet attached hereto.

I hereby claimed the benefit under 35 USC 119(e) of any United States provisional application(s) listed below.

Application Number(s) Filing Date (Day/Month/Year)

☐ Additional provisional application  
Numbers are listed on a supplemental  
Priority data sheet attached hereto.

I hereby appoint the following attorney(s) and/or agent(s), with full powers of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

**Raymond Yat Chiu Chan, Reg. No. 37,484**

Address all correspondence to: 1050 Oakdale Lane, Arcadia, CA 91006-2222, U.S.A.

Telephone Calls to: (626) 571-9812

Facsimile Calls to (626) 571-9813

I hereby declare that all Statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor (given name, family name) Ben M. HSIA

Inventor's signature

Date

Residence 19401 Business Center Drive, Northridge, CA 91324

Citizenship U.S.A.

Post Office Address Same as above

Full name of second joint inventor, if any (given name, family name) \_\_\_\_\_

Second Inventor's signature \_\_\_\_\_

Date \_\_\_\_\_

Residence \_\_\_\_\_

Citizenship \_\_\_\_\_

Post Office Address \_\_\_\_\_

☐ Additional inventors are being named on separately numbered sheets attached hereto.

Applicant or Patentee: \_\_\_\_\_ Attorney's  
Serial or Patent No.: \_\_\_\_\_ Docket No.: USP1482A-MTS  
Filed or Issued: \_\_\_\_\_  
For: \_\_\_\_\_

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY  
STATUS (37 CFR 1.9 (f) and 1.27 (b)) – INDEPENDENT INVENTOR**

As a below named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9 (c) for purposes of paying reduced fees under section 41 (a) and (b) of Title 35, United States Code, to the Patent and Trademark Office with regard to the invention entitled:  
One-Hand Operational Control Device of Foldable Stroller described in:

- ☒ the specification filed herewith  
☐ application serial no. \_\_\_\_\_, filed \_\_\_\_\_  
☐ patent no. \_\_\_\_\_, issued \_\_\_\_\_

I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who could not be classified as an independent inventor under 37 CFR 1.9 (c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9 (d) or a non profit organization under 37 CFR 1.9 (e).

Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

- ☒ no such person, concern, or organization  
☐ person, concern or organizations listed below\*

\*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

FULL NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

FULL NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

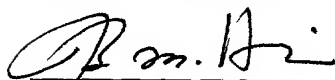
FULL NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28 (b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statements is directed.

Ben M. HSIA  
NAME OF INVENTOR NAME OF INVENTOR NAME OF INVENTOR



Signature of Inventor

Signature of Inventor

Signature of Inventor

4-19-01

Date

Date

Date